

| ORDER FOR SUPPLIES OR SERVICES | | | | | | | | | | PAGE 1 OF 4 | | |
|--|--|---|---|---|--|--|--|---|--|---|--|--|
| 1. CONTRACT PURCH ORDER/AGREEMENT NO. <div style="border: 1px solid black; padding: 2px;">DAAE20-98-D-0087</div> | | | 2. DELIVERY ORDER/CALL NO. <div style="border: 1px solid black; padding: 2px;">0021</div> | | 3. DATE OF ORDER/CALL (YYYYMMDD) <div style="border: 1px solid black; padding: 2px;">2002DEC18</div> | | 4. REQUISITION/PURCH REQUEST NO. <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div> | | 5. PRIORITY <div style="border: 1px solid black; padding: 2px;">DOA5</div> | | | |
| 6. ISSUED BY TACOM-ROCK ISLAND AMSTA-AQ-ARCC ELAINE ROSE (309)782-4999 ROCK ISLAND IL 61299-7630 EMAIL: ROSEE@RIA.ARMY.MIL | | | CODE <div style="border: 1px solid black; padding: 2px;">W52H09</div> | | 7. ADMINISTERED BY (If other than 6) <div style="border: 1px solid black; padding: 2px;">DCMA CLEVELAND ADMIRAL KIDD CENTER 555 EAST 88TH STREET BRATENAH OH 44108-1068</div> | | | CODE <div style="border: 1px solid black; padding: 2px;">S3603A</div> | | 8. DELIVERY FOB <div style="border: 1px solid black; padding: 2px;"><input checked="" type="checkbox"/> DESTINATION <input type="checkbox"/> OTHER (See Schedule if other)</div> | | |
| 9. CONTRACTOR <div style="border: 1px solid black; padding: 2px;">HUNTER MFG CO 30525 AURORA ROAD SOLON OH 44139-2795</div> | | | CODE <div style="border: 1px solid black; padding: 2px;">92878</div> | | FACILITY <div style="border: 1px solid black; padding: 2px;">C</div> | | NONE <div style="border: 1px solid black; padding: 2px;">SC1012</div> | | 10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div> | | | |
| NAME AND ADDRESS | | | 11. X IF BUSINESS IS <div style="border: 1px solid black; padding: 2px;"><input checked="" type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMAN-OWNED</div> | | 12. DISCOUNT TERMS | | | 13. MAIL INVOICES TO THE ADDRESS IN BLOCK <div style="border: 1px solid black; padding: 2px;">See Block 15</div> | | | | |
| 14. SHIP TO <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div> | | | CODE <div style="border: 1px solid black; padding: 2px;"></div> | | 15. PAYMENT WILL BE MADE BY <div style="border: 1px solid black; padding: 2px;">DFAS-COLUMBUS CENTER DFAS-CO-JNF/NEW DOMINION P O BOX 182041 COLUMBUS OH 43218-2041</div> | | | | CODE <div style="border: 1px solid black; padding: 2px;">SC1018</div> | | MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2 | |
| 16. TYPE OF ORDER | | DELIVERY/ CALL <div style="border: 1px solid black; padding: 2px;"><input checked="" type="checkbox"/></div> | | THIS DELIVERY ORDER IS ISSUED ON ANOTHER GOVERNMENT AGENCY OR IN ACCORDANCE WITH AND SUBJECT TO TERMS AND CONDITIONS OF ABOVE NUMBERED CONTRACT. | | | | | | | | |
| PURCHASE | | Reference your <input type="checkbox"/> Oral <input type="checkbox"/> Written Quotation _____, Dated _____. | | furnish the following on terms specified herein. | | | | | | | | |
| | | | | ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME. | | | | | | | | |
| <div style="display: flex; justify-content: space-between;"> <div>NAME OF CONTRACTOR</div> <div>SIGNATURE</div> <div>TYPED NAME AND TITLE</div> <div>DATE SIGNED (YYYYMMDD)</div> </div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies: </div> | | | | | | | | | | | | |
| 17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div> | | | | | | | | | | | | |
| 18. ITEM NO. | | 19. SCHEDULE OF SUPPLIES/SERVICE | | | | 20. QUANTITY ORDERED/ ACCEPTED* | | 21. UNIT | 22. UNIT PRICE | | 23. AMOUNT | |
| | | SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price KIND OF CONTRACT: Supply Contracts and Priced Orders | | | | | | | | | | |
| * If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle. | | | | | 24. UNITED STATES OF AMERICA JOYCE L KLEIN /SIGNED/ KLEINJ@RIA.ARMY.MIL/2002DEC18/2-5051 BY: _____ CONTRACTING/ORDERING OFFICER | | | | | 25. TOTAL \$364,402.87 | | |
| 27a. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO CONTRACT EXCEPT AS NOTED | | | | | | | | | | | | |
| b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE | | | | | | c. DATE (YYYYMMDD) | | d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE | | | | |
| e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE | | | | | | 28. SHIP. NO. | | 29. D.O. VOUCHER NO. | | 30. INITIALS | | |
| f. TELEPHONE NUMBER | | g. E-MAIL ADDRESS | | | | <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL | | 32. PAID BY | | 33. AMOUNT VERIFIED CORRECT FOR | | |
| 36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT. | | | | | | 31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL | | | | 34. CHECK NUMBER | | |
| a. DATE (YYYYMMDD) | | b. SIGNATURE AND TITLE OF CERTIFYING OFFICER | | | | | | | | 35. BILL OF LADING NO. | | |
| 37. RECEIVED AT | | 38. RECEIVED BY (Print) | | 39. DATE RECEIVED (YYYYMMDD) | | 40. TOTAL CONTAINERS | | 41. S/R ACCOUNT NUMBER | | 42. S/R VOUCHER NO. | | |

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|--|---|-------------|
| CONTINUATION SHEET | Reference No. of Document Being Continued PIIN/SIIN DAAE20-98-D-0087/0021MOD/AMD | Page 2 of 4 |
| Name of Offeror or Contractor: HUNTER MFG CO | | |

SUPPLEMENTAL INFORMATION

THIS DELIVERY ORDER IS FOR THE FOLLOWING:

CLIN 0005AA M1A1-19 PRECLEANER, NSN: 4240-01-026-3112, 839 each

DELIVERY WILL BE F.O.B. DESTINATION AS SHOWN IN SECTION B

NO FIRST ARTICLE REQUIREMENT.

ALL OTHER TERMS AND CONDITIONS OF THE BASIC ORDERING AGREEMENT APPLY.

*** END OF NARRATIVE A 001 ***

Name of Offeror or Contractor: HUNTER MFG CO

| ITEM NO | SUPPLIES/SERVICES | QUANTITY | UNIT | UNIT PRICE | AMOUNT |
|---------|---|----------|------|--------------|---------------|
| 0005 | <p>SUPPLIES OR SERVICES AND PRICES/COSTS</p> <p><u>Supplies or Services and Prices/Costs</u></p> <p>NSN: 4240-01-026-3112 NOUN: M1A1-19 PRECLEANER AND PART FSCM: 81361 PART NR: D5-19-2353 SECURITY CLASS: Unclassified</p> | | | | |
| 0005AA | <p><u>PRODUCTION QUANTITY</u></p> <p>CLIN CONTRACT TYPE: Firm-Fixed-Price PRON: S63ZT375SB PRON AMD: 01 ACRN: AA AMS CD: 070011</p> <p><u>Packaging and Marking</u> PACKAGING/PACKING/SPECIFICATIONS: SPI P5-19-2353 LEVEL PRESERVATION: Military LEVEL PACKING: B</p> <p><u>Inspection and Acceptance</u> INSPECTION: Origin ACCEPTANCE: Origin</p> <p><u>Deliveries or Performance</u> DOC SUPPL <u>REL CD MILSTRIP ADDR SIG CD MARK FOR TP CD</u> 001 W58HZ12337A432 W22PVJ J 2 <u>DEL REL CD QUANTITY DEL DATE</u> 001 35 31-DEC-2002 002 65 31-JAN-2003 003 100 28-FEB-2003 004 200 30-MAY-2003 005 200 30-JUN-2003 006 200 31-JUL-2003 007 39 29-AUG-2003</p> <p>FOB POINT: Destination</p> <p>SHIP TO: <u>PARCEL POST ADDRESS</u> (W22PVJ) XU GENERAL SUPPLY STORAGE POINT BLUE GRASS ARMY DEPOT 2091 KINGSTON HWY RICHMOND KY 40475-5000</p> <p><u>CONTRACT/DELIVERY ORDER NUMBER</u> DAAE20-98-D-0087/0021</p> | 839 | EA | \$ 434.33000 | \$ 364,402.87 |

Name of Offeror or Contractor: HUNTER MFG CO

CONTRACT ADMINISTRATION DATA

| | | | | | | | | | | JOB | | | | |
|-------------|----------------------|-------------|----------------------------------|----------------------------------|-----------|----|------|--------|--------|----------------|----------------|---------------|------------|--|
| LINE | PRON/ | OBLG | | | | | | | | ORDER | ACCOUNTING | OBLIGATED | | |
| <u>ITEM</u> | <u>AMS CD</u> | <u>ACRN</u> | <u>STAT</u> | <u>ACCOUNTING CLASSIFICATION</u> | | | | | | <u>NUMBER</u> | <u>STATION</u> | <u>AMOUNT</u> | | |
| 0005AA | S63ZT375SB | AA | 2 | 97 | X4930AC61 | 6N | | 26FB | S19130 | | W13G07 | \$ | 364,402.87 | |
| 070011 | | | | | | | | | | | | | | |
| | | | | | | | | | | | TOTAL | \$ | 364,402.87 | |
| | | | | | | | | | | | | | | |
| SERVICE | | | | | | | | | | ACCOUNTING | | OBLIGATED | | |
| <u>NAME</u> | <u>TOTAL BY ACRN</u> | | <u>ACCOUNTING CLASSIFICATION</u> | | | | | | | <u>STATION</u> | <u>AMOUNT</u> | | | |
| Army | AA | | 97 | X4930AC61 | 6N | | 26FB | S19130 | | W13G07 | \$ | 364,402.87 | | |
| | | | | | | | | | | | TOTAL | \$ | 364,402.87 | |